

Library

24 MAR 56
17

CAMELFORD DISTRICT COUNCIL

A N N U A L R E P O R T

of the

MEDICAL OFFICER OF HEALTH

for the year

1954



Health Area Office,
LAUNCESTON.
Cornwall.

WILLIAM PATERSON, M.B., Ch.B., D.P.H.
Medical Officer of Health



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29090027>

CAMELFORD RURAL DISTRICT COUNCIL

Members of the Public Health Committee, 1954

Mrs J.B. WHITEHOUSE	- Chairman
H. BRAY	S.J. BIDDICK
J.A.M. KENT	F.W. LITTLEJOHNS
J.F. LORD	J. LITTLEHENS
H. NORTHCOTT	T.C. OATES
M. OLDE	M.L. PARSONS
R.H. PETHICK	M. RICE
J. SETCHELL	A. BONEY
J.W.P. COGGIN	L. DENNIS
R.E. ELSON	M.C. FRADGLEY
Mrs K. GARBETT	W.J. HARRIS
W.J. HAWKEN	F. HEARD
G.A. ILES	W.H. VIMING
T.B. WAKEHAM, Jnr.	P.J.J. WHITING
W.J. WILLIAMS	H.I.P. NUTE
Mrs K.Q. DAVEY	

Public Health Officers of the Local Authority

MEDICAL OFFICER OF HEALTH: W.H.P. MINTO, M.B., Ch.B., D.P.H.
(Resigned 24.4.54)
W. PATTERSON, M.B., Ch.B., D.P.H.
(appointed 12.3.54 -
assumed duty 14.6.54)

also holds appointments of: '

Medical Officer of Health	Launceston Rural District Council
	Launceston Borough Council
	Bude/Stratton Urban District Council
	Stratton Rural District Council

Assistant County Medical Officer: Area 6, Cornwall County Council
School Medical Officer: Cornwall County Council

SANITARY INSPECTOR:

Robert R. HAYLETT, A.R.San.I., M.S.I.A.

SUMMARY OF VITAL STATISTICS

Area (in acres)	52,544
Population	7,380
No. of separate Dwellings occupied	2,258
Rateable Value 1954	£43,192
Product of ld. rate	£172.5.3d.

<u>Live Births</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate per 1000 estimated population</u>
Legitimate	99	54	45	14.49
Illegitimate	8	6	2	
<u>Stillbirths</u>		NIL		
<u>Deaths (all causes)</u>	87	43	44	11.78

Deaths from:	Puerperal Causes	NIL
	Puerperal and post abortive	NIL
	Sepsis	NIL
	Other Puerperal Causes	NIL

Infant Mortality (Deaths under 1 year per 1000 live births) 1 female.
Rate: 9.34

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths from Cancer (all ages)	7	9	16
Measles (all ages)		N I L	
Whooping Cough (all ages)		N I L	
Diarrhoea (under 2 years)		N I L	

To the Chairman and Councillors of the Rural District of Camelford:

Madam Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health on the health and sanitary circumstances of the Rural District for the year 1954.

The health of the people of the district, as far as can be judged by vital statistics, has remained satisfactory, the main cause of death again being heart disease in various manifestations.

Once again no case of diphtheria was notified. Whooping Cough was the most common infectious disease, with its peak incidence in May, and was of a mild type.

The sanitary circumstances of the district are dealt with in Section "C" of the report.

The Housing Repairs and Rents Act, 1954, brought slum clearance once more into the housing picture, requiring councils during the subsequent year to make a survey of their areas for this purpose.

I should like to express appreciation I have received from the General Medical Practitioners in the District. I wish to thank Mr Haylett for his valuable assistance, not only in the preparation of this Report, but also in all aspects of our work.

In conclusion, I should like to offer my sincere thanks to the Chairman and Members of the Public Health Committee for their help and encouragement throughout the year.

I have the honour to be,

Your obedient Servant,

WILLIAM PATERSON

December 1955

Medical Officer of Health

SECTION "A"

Natural and Social Conditions

Area (in acres) 52,544. Camelford Rural District is the country from Delabole Point in Port Isaac Bay to Strangles Beach, north of Boscastle, inland to St. Clether and south to St. Breward and consists for the most part of three plateaux 400 ft., 700 ft. and 1,100 ft. above sea level.

The geology of the District is very complex, due to much faulting and overthrusting. The rocks in the area west of the River Camel are Upper Devonian and it is in these beds that the famous Delabole Slate has been quarried for several centuries. Along the northern boundary running east to west is Davidstow anti-cline, the northern flank of which disappears under the culm measures near Boscastle.

The beds in the anti-cline can be seen in the Tintagel cliff sections, black shales, slates and volcanics are well exposed. East of the River Camel is the granite mass of Bodmin Moor and at St. Breward a fine silver grey granite of the highest quality is quarried.

Population - The Registrar General has estimated the population for the mid-year 1954 to be 7,380, an increase of 50 in the population for the previous year.

Vital Statistics - It is important that too much weight should not be attached to small variations in these rates from one year to the other, particularly where relatively small populations are involved - attention should rather be paid to the trend of these rates over a period of years.

Deaths - The total number of deaths assigned to the District for the year was 87 compared with 87 in 1953. The crude death rate based on the mid-year population was 11.78 compared with 11.87 in the previous year.

The following table has been compiled for comparison with previous years:

<u>Years</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded Rate</u>
1948	94	46	48	12.60
1949	87	46	41	11.59
1950	112	51	61	15.10
1951	115	58	57	15.65
1952	93	45	48	12.62
1953	87	43	44	11.87
1954	87	43	44	11.78

In order to compare the mortality in the District with the mortality for England Wales, it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District, an

"Area Comparability Factor" which has been estimated by the Registrar General as .83 for the District.

The Standardised Death Rate, therefore, is 9.77 which may be compared with that of 11.3 for England and Wales.

Births - The number of live births assigned to this District was 107 compared with 95 in 1953. The rate per thousand of the population was 14.49. When the Registrar General's Area Comparability Factor for births (1.14) is applied to this figure, the Standardised Birth Rate of 16.51 for this District compares with 15.2 for England and Wales.

Stillbirths - The number of stillbirths during 1954 was NIL.

Illegitimate Births - There were 8 illegitimate births assigned to the District during the year, 6 males, 2 females, compared with 7 in 1953. Shown as a proportion of the total number of live births this represents 7.47 per cent.

Maternal Mortality - No cases of death during pregnancy have been recorded.

Infant Mortality - The number of infants who died before reaching their first birthday was 1. The infant mortality rate of 9.54 compares with 25.5 for England and Wales per 1,000 related live births. The cause of death in this case was Encephalitis.

MORTALITY TABLE

Classified in accordance with 36 headings based on the Abbreviated List of the International Statistical Classifications of Diseases, Injuries and Causes of Death, 1948.

<u>Cause of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	1	-	1
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infection	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	1	1	2
11. Malignant neoplasm, lungs, bronchus	-	2	2
12. Malignant neoplasm, breast	-	-	-
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms	6	6	12
15. Leukaemia Aleukaemia	-	-	-
16. Diabetes	-	1	1
17. Vascular lesions of nervous system	5	5	10
18. Coronary disease, angina	5	9	14
19. Hypertension with Heart disease	5	1	6
20. Other heart disease	3	11	19
21. Other circulatory disease	2	2	4
22. Influenza	-	-	-
23. Pneumonia	2	1	3
24. Bronchitis	2	1	3
25. Other diseases of Respiratory system	-	-	-
26. Ulcer of stomach and duodenum	1	-	1
27. Gastritis, enteritis and diarrhoea	-	-	-
28. Nephritis and nephrosis	1	-	1
29. Hyperplasia of prostate	1	-	1
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	-	-	-
32. Other defined and ill-defined causes	3	2	5
33. Motor vehicle accidents	-	-	-
34. All other accidents	-	-	-
35. Suicide	-	2	2
36. Homicide and operations of war	-	-	-
	43	44	87

SECTION "E"

General Provision of Health Services in Camelford Rural District

General Medical Services

General Medical services under Part IV of the National Health Service Act, 1946, are provided for the bulk of the population by the general practitioners resident in the district.

Midwifery and Home Nursing

Midwifery Services in the district are provided by (i) the family doctor - ante and post-natal care and home confinements; (ii) the County Council - district midwives; (iii) the Regional Hospital Board - hospitals for delivery and treatment.

Maternity home accommodation is available on social grounds in appropriate cases, Old Tree Maternity Home, Launceston being most used for this purpose for the Rural District.

Health Visiting

The County Council continues to provide a Health Visiting Service. The nurse midwives are responsible for health visiting in the district and are specially trained in the care of the mother and young child. They are available to give advice on health matters in the home or at the clinic and also act as school nurses.

Home Help Service

The County Council, as local health authority, is responsible for the provision of this Service throughout the County.

Ambulance Service

The County Council is responsible for the Ambulance Service, day-to-day administration of which is carried out from the Health Area Office. A whole-time paid Service is provided during weekdays and this is supplemented by part-time personnel of the voluntary organisations at night time and during weekends.

Hospital Car Service

"Utilecon" sitting case ambulances are used for conveying the majority of sitting cases and when it is appropriate some such cases are carried by Hospital Car Service.

School Health

The County Council provides an extensive School Health Service. Your Medical Officer of Health in his capacity of School Medical Officer carries out routine and special examinations of the children and schools and immunisation.

Infant Welfare Centre

Monthly Infant Welfare Clinics are held at Camelford, Delabole, St. Teath and St. Breward. Your Medical Officer of Health is in attendance in his capacity as Assistant County Medical Officer.

Dental Clinic

A whole-time School Dentist is based on Launceston and he works at the County Council Dental Clinic in the Health Clinic, Launceston. He also holds twice-monthly clinic sessions at Camelford and Delabole.

Speech Therapy Clinic

A Speech Therapy Clinic for school and pre-school children is held each Friday afternoon at the Health Clinic, Launceston.

Ophthalmic Clinic

The Regional Hospital Board Eye Specialist holds an Eye Clinic for school children and children under school age at the Health Clinic, Launceston and Women's Institute, Camelford. This Clinic is arranged as and when a suitable number of children become available.

Orthopaedic Clinic

Also provided by the Regional Hospital Board at Camelford is an Orthopaedic Clinic held weekly.

Out-patients' Clinics

The Regional Hospital Board also provides Out-Patients' Clinics at the Launceston Hospital for Medical, Surgical, Gynaecological, Skin, Ear Nose and Throat and Tuberculosis patients. A physiotherapy Clinic is available at the Tavistock and Holsworthy Hospitals. A psychiatric Clinic is held at the South Devon and East Cornwall Hospital, as is also a Venereal Diseases Clinic. Out-patients are also treated at the Royal Cornwall Infirmary and the East Cornwall Hospital, Bodmin.

Chronic Sick

Accommodation is available for Chronic sick cases at St. Mary's Hospital, Launceston and limited Part III accommodation is also provided there for those cases who come under the care of the Welfare Authority (Cornwall County Council).

Hospitals

The District is served by East Cornwall Hospital, Bodmin and Royal Cornwall Infirmary, Truro. Patients are admitted also to the following hospitals in Plymouth - Prince of Wales, Mount Gold, South Devon & East Cornwall, Royal Albert (Devonport), Alexandra Maternity Home and the Royal Eye Infirmary. The Scott Isolation Hospital, Plymouth and Isolation Hospital, Truro admit cases of Infectious Diseases from the District. Cases of Tuberculosis requiring sanatorium treatment are, as a rule, admitted to Didworthy or Tavy Sanatoriums.

Mental Health

Patients from the District who require hospital care and/or treatment for mental illnesses are admitted either to St. Lawrence's Hospital, Bodmin, Laninval House, Bodmin or Moorfields Hospital, Ivybridge.

Aftercare is a function of the County Council.

Laboratory facilities

The Public Health Laboratory, Dix's Field, Exeter, is the easiest of access from this District and it renders valuable service towards the detection and prevention of spread of diseases in the District.

SECTION "C"

Sanitary Circumstances of the District

Water Supply

The water supplies of this District can be grouped into three classes:

- (i) supplied by the District Council
- (ii) supplied by other Authorities
- (iii) private springs and wells.

(i) The Parishes of Camelford, Boscastle and the majority of the properties in the parish of St. Brevard are supplied by the District Council.

In previous reports it has been mentioned that in the case of the Camelford supply, there is a liability of animal pollution. This will still exist when the new filter to the treatment plant is in operation.

At Boscastle, there is a danger of supplies running short, particularly during the holiday season. The Council have considered supplementing the source from the Polruary area and I must stress that, although the sources may be found free of bacteriological contamination, the installation of a chlorination plant would be, to say the least, desirable.

The higher parts of St. Brevard are supplied from two sources: a surface spring at Churchtown and moorland water which is collected at Silver Spring and pumped by runs. In the latter case there is considerable risk of pollution and, since the supply is small, it seems doubtful whether it is wise to continue to use it.

(ii) The area supplied by other Authorities are as follows:

Tintagel, St. Teath and Delabole are supplied by the North Cornwall Joint Water Board.

The only other water supplied to the district is the lower part of St. Brevard by the Bodmin Water Company.

I must again draw the Council's attention to the urgent need for a potable supply of water for the northern part of the district, notably Otterham, Davidston, Tremail and Treassa.

During the past year the following samples have been taken and results are as follows:

1. BACTERIOLOGICAL

(i) Public Piped Supplies

Ministry of Health Classification

District	<u>Satisfactory</u>	<u>Satisfactory</u>	<u>Suspicious</u>	<u>Unsatisfactory</u>
Camelford	7	4	2	3
Boscastle	4	-	-	-
St. Brevard	2	-	-	-

Totals	<u>13</u>	<u>4</u>	<u>2</u>	<u>3</u>
--------	-----------	----------	----------	----------

(ii) Other Public Supplies

	<u>Highly Satisfactory</u>	<u>Satisfactory</u>	<u>Suspicious</u>	<u>Unsatisfactory</u>
Boscastle	3	-	-	1
Tresparrett	2	-	-	1
St. Juliot	1	-	-	-
Davidstow	1	1	-	-
Trewassa	1	1	-	-
Tremail	3	-	-	-
Totals	11	2	-	2

(iii) Private Supplies

Boscastle	-	-	1	-
Camelford	-	4	-	2
Tintagel	4	2	-	-
Otterham	1	-	-	-
Totals	5	6	1	2

<u>Grand Totals</u>	<u>29</u>	<u>12</u>	<u>3</u>	<u>7</u>
---------------------	-----------	-----------	----------	----------

B. CHEMICAL

(i) Public Supplies Analysis

	<u>Camelford</u>		<u>District Boscastle</u>	<u>St. Breward</u>
pH Value	5.6	5.2	6.7	6.0
Turbidity	Clear	Clear	Clear	Clear
Temp.hardness	17	21	20	28
Perm.Hardness	13	4	25	17
Chlorine as chlorides	14	17	24	23
Total solids	90	70	130	115
O.A.in 4 hrs.at 27°c.	0.05	0.10	0.10	0.55
Nitrogen as nitrates	0.01	0	0	0
Nitrogen as nitrates	3.0	4.0	2.0	3.6

All figures other than those for pH value, are expressed in parts per million.

NOTE: All the above four samples are plumbo solvent.

Sewerage and Sewerage Disposal

The Council has sewerage schemes in the parishes of Camelford, Tintagel, Boscastle, Delabole and St. Teath.

At Tintagel and Boscastle the raw sewage discharges into the sea and no trouble has been experienced.

The work on the Council's sewerage scheme for Treknaw, Tintagel, was well in hand at the end of the year.

Plans for the St. Brevard and Canelford Schemes are in hand - at Canelford the present works, built 50 years ago, are totally inadequate for present requirements and the effluent discharging into the River Camel is very much below the required standard.

Public Cleansing

A comprehensive scheme covering all but the most outlying properties is in operation for the collection of house and trade refuse. The amount of refuse collected is continually increasing, and it may well be that in the near future additional labour will have to be employed.

The emptying of cesspits and septic tanks is carried out by a private company and this arrangement appears to be satisfactory in every way.

Prevention of Damage by Pest Act, 1949

The Council, together with the neighbouring authorities of Wadebridge Rural District and Padstow U.D. operate a joint scheme, which runs smoothly and efficiently.

National Assistance Act, 1948

No certificate under Section 47 of this Act was submitted to the Council by the Medical Officer of Health. The Medical Officer of Health is authorised by the Council to take immediate action to obtain removal orders under Section 47 of the National Assistance Act, 1948 as amended by the National Assistance (Amendment) Act, 1951. The type of case involved in such action comprises persons suffering from grave chronic diseases or, being aged, infirm or physically incapacitated, are living in insanitary conditions and unable to devote themselves or obtain proper care and attention.

SECTION "D"

Housing

Satisfactory progress was maintained on the Council's housing schemes during the year.

The improvement in the general standards of housing in the area, mentioned in previous reports, has continued. Increasing use is being made of improvement grants for this purpose, and the Council is to be congratulated in its enlightened attitude in this matter.

Housing Statistics

1. Inspections of Dwelling Houses during the year
 - (a) No. of dwelling houses inspected for defects under Public Health or Housing Acts..... 250
 - (b) Inspections made for the purpose..... 300
2.
 - (a) No. of dwelling houses inspected and recorded under Housing Consolidated Regs. 1925/32..... nil
 - (b) Inspections made for the purpose..... nil
3. No. of dwelling houses found to be in a state dangerous or injurious to health as to be unfit for human habitation..... 1
4. Dwelling houses (exclusive of those under preceding sub-heading) not in all respects reasonably fit for habitation..... nil
5. Remedy of Defects during the year without the service of Formal Notice:
 - (a) No. of houses rendered fit in consequence of action by Local Authority or Officers..... 25
 - (b) Housing Act..... 7
 - (c) Public Health Act..... 18
6. Action under Statutory Powers during the year:
 - (a) Proceedings under Sections 9, 10 and 16 Housing Act 1936:
 - (i) Dwelling houses in respect of which notices were served requiring repairs..... nil
 - (ii) Dwelling houses rendered fit after service of formal notice..... nil
 - By Owners..... nil
 - By Local Authority in default of owners..... nil
 - (b) Proceedings under Public Health Acts:
 - (i) Dwelling houses in respect of which notices were served requiring defects to be remedied..... nil
 - (ii) Dwelling houses in which defects were remedied after service of formal notices..... nil
 - By Owners..... nil
 - By Local Authority in default of owners..... nil

7. (a) Proceedings under Sec. 11 and 13 of the Housing Act 1936:

(i)	Dwelling houses represented under Sec.11.....	1
(ii)	Dwelling houses in respect of demolition order.....	nil
(iii)	Dwelling houses demolished.....	nil
(iv)	Dwelling houses rendered fit by owner.....	nil
(v)	Dwelling houses where undertakings not to re-let at end of present tenancy were accepted from the owner.....	1

(b) Proceedings under Sec.12 of the Housing Act 1936:

(i)	Separate tenements or underground rooms in respect of which Closing Orders were made.....	nil
(ii)	No. of separate tenements or underground rooms in respect of which Closing Orders were determined.....	nil

(c) Proceedings under Sections 25 and 26 of Housing Act 1936

(i)	No. of houses dealt with under Section 25.....	nil
(ii)	No. of Clearance Orders made under Section 26.....	nil
(iii)	No. of families living in Clearance Areas.....	nil

SECTION "E"

Inspection and Supervision of Food

1. Milk

Under the Milk (Special Designations) (Pasteurised and Sterilised) Milk Regulations 3 licences were issued to traders outside the area to sell raw tuberculin tested milk in the area. 3 licences were also issued to enable dealers whose premises are within the District to sell milk under the special Designated Pasteurised Regulations.

2. Ice-Cream

There are 25 premises registered for the sale and storage of ice-cream and of these only one manufactures the product. It is now possible for Local Authorities to exercise more stringent control over ice-cream manufacturers and mainly due to the co-operation of the trade, the days of the individual making ice-cream has disappeared in favour of the five or more larger manufacturers.

3. Food Premises

The number of premises in which food is prepared and sold consists of the following:

Bakehouses.....	3
Butchers....	12
Canteens (work).....	1
Clubs.....	3
Fried Fish Shops.....	7
Greengrocers.....	12
Licensed Premises and hotels.....	12
Catering Establishments - exact number not known	
Bed and Breakfast.....	400
Private Hotels.....	50

All premises were inspected at frequent intervals throughout the year.

4. Condemnation of Unsound Food

During 1954 the quantity of food condemned was as follows:-

	cwts.	qtrs.	lbs.
Tinned Custard Powder	1	2	21 $\frac{1}{4}$
Tinned Soup	-	1	14
" (Celery)			9
Blancmange Powder			27
Sandwich Spread		1	8 $\frac{1}{2}$
Half Leg Mutton			7 $\frac{1}{2}$
One Beast Liver			18
Hind Quarter of Beef		1	18
Leg of Pork			13
Smoked Middle Bacon			21
Tinned Cooked Shoulder Ham			22 $\frac{1}{2}$
Cut-through Bacon			22

Fore quarter Bacon		18
Hindquarter of Beef	2	$3\frac{1}{2}$
<hr/>		
	4	27 $\frac{1}{2}$
<hr/>		

Meat Inspection

There are no licensed slaughterhouses in the District, the majority of home-killed meat being supplied from Launceston and Wadebridge, all of which is inspected at the Abattoir. The butchers' shops in the District on the whole are satisfactory.

SECTION "F"

Prevalence of, and control over, Infectious and other Diseases

Smallpox:

No case was reported during the year. There is an unjustifiable sense of complacency about this disease on the part of the general public which leads to a neglect of infant vaccination on the part of parents. Air travel, however, has increased very considerably the risk of the introduction of smallpox into this country and the need for adequate protection by vaccination is greater than ever before. It should be pointed out that vaccination by modern techniques produces only a small local reaction with little or no general reaction and parents can be reassured on this account.

40 primary vaccinations and 8 re-vaccinations were carried out during 1954, figures which give no grounds for satisfaction.

Diphtheria

No case was notified during the year. The number of children receiving primary immunisation was 111, of whom all received the combined prophylactic against whooping cough and diphtheria. To ensure continued freedom from diphtheria, it is necessary to maintain an adequate level of immunity in the population as a whole. For this reason, all parents should ensure that their children are protected in this way. Arrangements to have immunisation done can be made with the family doctor or at the Infant Welfare Centre.

Immunisation in relation to Child Population - See Table V.

Whooping Cough

This was the most prevalent infectious disease during the year, 56 cases being notified, the majority in the first part of the year. An effective vaccine is available against this disease and this is usually administered in combination with the diphtheria prophylactic.

Acute Poliomyelitis

One case of non-paralytic poliomyelitis, occurring in a child, was notified in 1954. This child, who had been on holiday in another part of the country immediately before falling ill, had undoubtedly contracted the infection while he was away from the district.

Food Poisoning

No case was notified during the year.

Pneumonia

There was an unusually high incidence of acute primary pneumonia during the summer months, 14 cases occurring in July and August. It will be recalled that the summer of 1954 was an exceptionally wet and cold one,

which may have contributed to this situation.

Tuberculosis

	<u>Males</u>		<u>Females</u>	
	<u>Pul.</u>	<u>Non.Pul</u>	<u>Pul.</u>	<u>Non.Pul</u>
Cases on Register 31.12.53	19	3	11	3
No. of cases notified during 1954	5	1	4	-
Cases Restored	-	-	2	-
Inward Transfers	-	1	-	-
less cases removed	3	-	3	1
Cases on Register at 31.12.54	21	5	14	2

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary Tuberculosis employed in the milk trade, or under Section 172 of the Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from Tuberculosis.

The Regional Hospital Board is responsible for treatment of Tuberculosis patients and the County Council for the prevention of spread of the disease and after-care of the patients.

Out-patients and contacts are seen by the Chest Physician (Dr Mellor) at the Chest Clinic at Launceston Hospital, and East Cornwall Hospital, Bodmin. The County Council Tuberculosis Health Visitors attend the Clinics, follow up the patients in their homes, trace contacts and sources of infection and thus acting as most valuable and essential "liaison officers" between the curative and preventive services, bridge a most alarming gap.

All susceptible contacts in the District are offered B.C.G. Vaccination. During the year, 74 persons received this protection in Health Area No. 6.

In 1954 the scheme for B.C.G. Vaccination of susceptible school leavers was put into operation by the County Council with an excellent response. It is a long-term scheme, however, with a five year follow-up period and it will not be possible to assess the results fully for some time.

SECTION "G"

Factories Act, 1937

Classified List of Registered Factories as at
31st December, 1954

<u>Nature of Employment</u>	<u>Power</u>	<u>Non-Power</u>
1. Blacksmiths	-	3
2. Motor Repairs, Garages	7	5
3. Carpentry, Joinery & Sawmills	7	2
4. Monumental Masons	1	-
5. Plumbers	-	-
6. Bakeries	3	-
7. Coach Painter	-	1
8. Granite works	3	-
9. Knitwear	-	1
10. Bootmaker, Harness and Boot Repairs	1	1
11. Pottery Manufacturing	2	-
12. Cheese	1	-
13. Processing Slate Granules	1	-
14. Engineering	1	-
15. Concrete Products	2	-

Prescribed Particulars on the Administration of the
Factories Act, 1937, for the year 1954

Factories Acts: 1937 and 1948

	<u>Number</u>	<u>Inspections</u>	<u>Notices</u>
Factories without power	13	10	-
Factories with power	29	14	-
Other premises	9	17	-
	51	41	-

TABLE I

TUBERCULOSIS

Age and Sex Distribution of Cases
and Deaths - 1954

<u>Age Groups</u>	<u>New Cases</u>				<u>Deaths</u>			
	<u>Pulmonary</u>		<u>Other</u>		<u>Pulmonary</u>		<u>Other</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0 -	-	-	-	-	-	-	-	-
1 -	-	-	-	-	-	-	-	-
5 -	1	1	1	-	-	-	-	-
15 -	-	1	-	-	-	-	-	-
20 -	-	1	-	-	-	-	-	-
25 -	3	1	-	-	-	-	-	-
35 -	-	-	-	-	-	-	-	-
45 -	-	-	-	-	-	-	-	-
55 -	1	-	-	-	-	-	-	-
65 and over	-	-	-	-	-	-	-	-
Age unknown	-	-	-	-	-	-	-	-
	5	4	1	-	-	-	-	-

TABLE II

VITAL STATISTICS

Year	Estimated Population	<u>Births</u>		<u>Deaths</u>			
		No.	Crude Rate	No.	Crude Rate	Under 1 year No.	All Ages Crude Rate
1948	7,457	94	12.60	3	31.9	94	12.60
1949	7,506	115	14.52	2	17.38	87	11.59
1950	7,415	91	12.27	3	32.96	112	15.10
1951	7,347	97	13.20	2	20.61	115	15.65
1952	7,366	94	12.76	2	21.27	93	12.62
1953	7,330	95	12.96	4	42.10	87	11.87
1954	7,380	107	14.49	1	9.34	87	11.78

TABLE III

Monthly Incidence of Notifiable Diseases (other than Tuberculosis)

	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Total
Whooping Cough	-	-	2	1	30	-	5	8	10	-	-	-	56
Measles	-	-	-	-	-	1	-	1	-	-	-	1	3
Scarlet Fever	-	-	-	-	-	-	-	1	-	-	2	-	3
Pneumonia	-	2	4	-	-	1	7	7	-	-	-	1	22
Erysipelas	-	-	-	-	-	-	-	-	-	-	1	-	1
Polio-myelitis (non-paralytic)	-	-	-	-	-	-	-	-	-	1	-	-	1
	-	2	6	1	30	2	12	17	10	1	3	2	86

TABLE IV

Notifications of Infectious Diseases in Cornwall County Council
Area 6, during the year 1954

	WHOOPING COUGH		MEASLES		SCARLET FEVER		PNEUMONIA		POLIO MYELITIS non-paralytic		INTERPERAL PYREXIA		TUBERCULOSIS-pulmonary		TUBERCULOSIS-non pulmonary		ERYSIPELAS		DYSENTERY		MENINGOCOCCAL INFECTION	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Camelford Rural District	27	29	-	3	2	1	7	15	1	-	-	-	5	4	1	-	1	-	-	-	-	-
Launceston Borough	-	-	2	10	-	1	2	-	1	-	-	-	3	2	-	1	-	1	3	1	-	-
Launceston Rural District	3	2	-	1	-	-	1	2	-	-	-	1	-	1	-	-	-	-	1	-	-	-
Bude/Stratton Urban District	1	1	22	3	-	2	3	1	-	-	-	-	5	1	-	-	-	-	-	-	1	-
Stratton Rural District	6	8	-	-	1	2	2	-	-	-	-	-	3	2	-	-	-	3	2	-	-	2
TOTALS	37	40	24	17	3	6	15	18	2	-	-	1	13	10	1	1	1	1	2	1	1	2

TABLE VImmunisation in Relation to Child Population

Number of children at 31st December 1954, who had completed a course of Immunisation at any time before that date (i.e. at any time since 1st January 1940)

Age at 31.12.54 i.e. Born in year	Under 1 1954	1 - 4 1953-1950	5 - 9 1949-1945	10 - 14 1944-1940	Under 15 Total
Last complete course of injec- tions (whether primary or booster) A.1950 - 1954	5	285	404	276	970
B.1949 or earlier			72	-	72
C. Estimated mid- year child population	107	377	545	525	1554
Immunity Index 100A/C	5	76	74	53	62

